



WEST VIRGINIA YOUTH WRESTLING ASSOCIATION  
REGION III TOURNAMENT  
Saturday, March 3, 2018

Held At Braxton County High School  
200 Jerry Burton Dr, Sutton, WV 26601

A West Virginia Youth Wrestling Association Regional Tournament

- 
- Entries: \$20.00 - **MAIL IN ONLY WITH PAYMENT** Eligibility: Age as of 1/1/18
- Deadline: All entries must be received by Monday, February 26, 2018 @ 9 p.m.
- Questions: 304-332-9943 or 304-619-1623 (Tim)
- Weigh Ins: March 3, 2018 at Braxton County High School - 7:00 a.m. to 9:00 a.m.
- Awards: Awards 1st thru 4th Place (5<sup>th</sup> and 6<sup>th</sup> place wrestlers will wrestle for this place)
- Rules: Three (3) One (1) minute periods for all 12-U age divisions, scholastic rules apply with sudden death overtime. Double elimination. **Must make base weight with no allowance in accordance with WYWA Rules.** If you do not make weight, you will not be permitted to move up a weight division. There will be no combining weight classes. No double entries.

Mail this portion to: Tim Casto, P.O. Box 23, Widen WV 25211

---

4-U	35, 40, 45, 50 and HWT (65 maximum)
6-U	40, 45, 50, 55, 60 and HWT (75 maximum)
7 & 8	45, 50, 55, 60, 65, 70, 75, 85, and HWT (120 maximum)
9 & 10	55, 60, 65, 70, 75, 80, 85, 90, 95, 105, 125, and HWT (160 maximum).
11 & 12	65, 70, 75, 80, 85, 90, 95, 100, 105, 115, 125, 135, 145, 160, and HWT (200 maximum)
Middle School	78, 84, 90, 95, 102, 110, 116, 123, 128, 135, 145, 155, 171, 190, and HWT (285 maximum) (No High School Students. Weight allowance in accordance with WVSSAC Rules - 2 lbs - 1/2/2 min periods)

Name: \_\_\_\_\_ Team: \_\_\_\_\_

Address: \_\_\_\_\_ (Phone No.) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age \_\_\_\_\_ Weight Class \_\_\_\_\_ Record \_\_\_\_\_ Years Wrestled \_\_\_\_\_

Name of School you attend (if home school - residence address): \_\_\_\_\_

By signing below, I release all sponsoring bodies, WYWA, the Region, the host club, and their Officials from any and all legal claims or rights to damages or injuries or losses suffered by my child or myself while participating in this event. I further certify that I have made base weight at the Tournament listed above and that I am a resident of the Region in which I am participating in.

Signature of Parent or Guardian \_\_\_\_\_ Date: \_\_\_\_\_

**If your child places in the top 6, your child qualifies for the WYWA State Championship. You will be asked if you are attending the WYWA State Championship that day and your entry fee (\$25.00) will be collected at the Region Tournament at the time your child receives his/her medal.**